Allied Health • Therapies

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Contents

to CCS Providers.....1

Rate Corrections for Selected Orthotics

Reimbursement rates for the following orthotic appliances were listed incorrectly in the October 2006 *Medi-Cal Update*. The correct rates, which are effective for dates of service on or after November 1, 2006, are listed below.

HCPCS Code	<u>Description</u>	<u>Rate</u>
L2036	Full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated	\$ 943.12
L2037	Full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated	943.12
L2038	Full plastic, double upright, with or without free motion knee, multi-axis ankle, custom fabricated	811.87
L3215	Ladies shoe, oxford, each	42.12
L3971	Molded shoulder, arm, forearm, and wrist, with articulating elbow joint, custom fabricated	1,077.21

Corrected rates are reflected on manual replacement pages <u>ortho cd1 15</u>, <u>21 and 29</u> (Part 2).

Corrections: DME Items Reimbursable Only to CCS Providers

HCPCS codes A4606 (oxygen probe), E0639 and E0640 (patient lifts) were incorrectly included in the *Durable Medical Equipment (DME) Billing Codes:* Frequency Limits section of the manual.

These codes are not reimbursable for adult Medi-Cal recipients and should not have been included in that manual section. The codes are reimbursable only for CCS clients. They have been correctly listed in the *Durable Medical Equipment (DME): Billing Codes for California Children's Services (CCS)* section.

Corrections are reflected on manual replacement pages <u>dura cd ccs 1</u> (Part 2) and <u>dura cd fre 1 and 2</u> (Part 2).

THP 1

Instructions for Manual Replacement Pages

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Remove and replace at the end of the California Children's Services (CCS) Billing Overview

section: CCS Program Billing Guidelines 1/2 *

Remove: cal child sar 7 thru 9 lnsert: cal child sar 7/8 *

Remove and replace: cal child ser 1/2 *

Insert: cal child ser 23 *

Remove and replace: dura cd ccs 1

dura cd fre 1/2

Remove and replace: forms leg 3/4 *

hcpcs 1/2 *

ortho cd1 15/16, 21/22 and 29/30

^{*} Pages updated due to ongoing provider manual revisions.